

**COMMUNITY-PARTNERED INTERVENTIONS
IN NURSING RESEARCH
TO REDUCE HEALTH DISPARITIES**

**Community-Partnered Interventions in Nursing Research to Reduce Health Disparities:
State of the Science Meeting**

Executive Summary

The National Institute of Nursing Research (NINR) and the National Center on Minority Health and Health Disparities (NCMHD) convened the meeting “Community Partnered Interventions in Nursing Research to Reduce Health Disparities”, on November 5-6, 2001, in Bethesda Maryland. Dr. Janice Phillips, Dr. Patricia Grady, and Dr. Toni Tripp-Reimer presided as chairs.

Background

It is well documented that racial and ethnically diverse minority populations experience poorer health status when compared with their white counterparts. In concert with the national emphasis on eliminating health disparities, NINR along with other Institutes and Centers at the National Institutes of Health (NIH) have outlined their respective objectives and strategic plans related to reducing/eliminating health disparities. NINR’s strategic plan on reducing health disparities is located at <http://www.nih.gov/ninr>. This workshop builds on NINR’s long history of supporting minority health initiatives; however this initiative places an increased emphasis on reducing health disparities through community partnered interventions in nursing research.

Community-partnered interventions are defined as interventions in which the investigator(s) establishes a research partnership with members of the target community throughout all phases of the research process. Community partnered interventions devoted to reducing health disparities are particularly needed because of their potential to: 1) build on existing community resources, knowledge, skill, and attributes; 2) engage community members in actively identifying and addressing key health issues or concerns; 3) facilitate the building of trusting relationships between the research community and target population; and 4) enhance the likelihood of long-term sustainability and follow-up. Additional benefits are that it: enhances the validity and quality of the research by incorporating the knowledge of the people involved; has the potential to “bridge cultural gaps” that may exist between the partners involved; incorporates cultural, social, and economic factors that may influence health; facilitates the design of culturally appropriate, sensitive, and linguistically appropriate measures and methods as well as provides resources and opportunities for the involved community.

Introduction

On November 5-6, 2001, 20 invited participants attended the two-day multidisciplinary meeting “Community-Partnered Interventions in Nursing Research to Reduce Health Disparities,” sponsored by NINR and the NCMHD.

The purposes of the conference were to:

- assess and discuss the state of the science on conducting research involving community partnerships.

- identify components of effective community partnered interventions devoted to reducing health disparities.
- identify future directions for nursing research involving community partnerships, particularly those devoted to reducing or eliminating health disparities.

Discussion by the group was wide-ranging representing several racial and ethnic perspectives and several disciplines. While much has been gleaned from previous research with racial ethnic populations, ongoing research is needed to provide direction for improving standards of care, informing public policy, and identifying strategies aimed at improving the health status and health outcomes of racial and ethnic minorities. The need to further enhance our knowledge and understanding of the numerous and complex factors (i.e., socioeconomic, cultural, societal, behavioral and biologic aspects of health) that influence the health status of racial and ethnic minority populations across the lifespan is important. The projected growth in minority populations further underscores the need to examine health disparities.

Conclusions from the group included the following summary points:

Components of Successful Interventions

Successful components of community-based research or community interventions to reduce health disparities were identified:

- Clear purposes and goals.
- Long-term commitment by the researcher.
- Trust, and respect for everyone in the partnership, and for diversity in and among the communities.
- Involvement of communities in all phases of the research process.
- Partnerships that enhance the ability to address ethical issues.
- Creating a balance between community-based or -partnered research and scholarship activities.
- Visibility of the research in academic institutions. Academic and institutional appreciation for community-partnered research.
- Sharing of power between researchers and communities in a realistic way.
- Continuing to implement findings into practice and policy.
- Inclusion of a service component.

- Environmental justice as an important focus.
- Training for the health professions conducting community-partnered interventions.

Research Recommendations

- Promising research areas can be categorized in the areas of health promotion, chronic conditions, and environmental and cultural considerations.

The breakout groups also named the following topics as promising research areas to consider:

- Develop methods to track how health disparities differ across different immigrant groups in the United States and globally.
- Support the development of culturally appropriate treatment methods to manage health problems, according to the beliefs and practices of each culture, rather than according to what researchers consider normative.
- Evaluate the efficacy of various service delivery methods for different communities and community-based strategies.
- Support research on the role of culture in the design, implementation, evaluation and dissemination of community-partnered interventions.

Recommendation for Research Methods

- Identifying different approaches to data analysis, especially as related to smaller databases or data that may not lend themselves well to traditional approaches to data analysis.
- Developing instruments that are valid and culturally appropriate with small samples.
- Creative and innovative methodological approaches for community-based research that have already proven successful.
- Evaluating the validity of health outcome measures across diverse populations.
- Evaluating alternatives to randomized clinical trials.
- Including environmental components and ecological models in community-based interventions.
- Including two or more outcome levels.
- Using cultural competence as a guiding principle in choosing intervention approaches.

- Enhancing dissemination of information about partnership strategies.
- Providing evidence of sustainability as an important part of any grant appreciation.
- Encouraging research with a variety of partnerships including consumers, community groups, researchers, policy-makers, health departments, foundations, CDC, and other NIH Institutes and Centers such as NIEHS and the NCMHD.
- Encouraging preliminary studies dealing with areas including research feasibility, continuation, evaluation, dissemination and sustainability.

Training Recommendations

The breakout groups named the following broad areas as important training considerations:

- Increasing the numbers of nurse scientists with emphasis on minority investigators and fast-track BSN to PhD programs.
- Training or technical assistance for those who want to conduct community-based research.
- Training and research skills for community partners and community participants.
- Training in cultural competency and in mentoring of nurse researchers or nurses who are willing to work with diverse groups.
- Implementing distance methodology (telehealth) and advanced technology in nursing practice and research
- Encouraging graduate-level, multidisciplinary courses to teach students about conducting research in the community.
- Strengthen the focus on cross-agency initiatives related to community-partnered interventions.
- Incorporating mechanisms to promote research partnerships between formalized nursing groups and other minority related organizations and entities.



**National Institute of Nursing Research
NATIONAL INSTITUTES OF HEALTH**

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**Bethesda Holiday Inn Select
Bethesda, MD**

November 5-6, 2001

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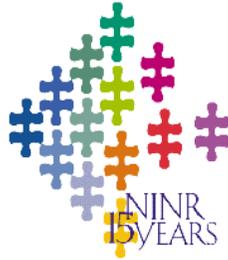
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AGENDA

MONDAY, NOVEMBER 5, 2001

10:00 a.m. - 10:30 a.m.

Welcome From the National Institute of Nursing Research (NINR)

- Dr. Patricia Grady, Director, NINR

Opening Remarks

- Dr. Janice Phillips, Program Director, NINR
- Dr. Toni Tripp-Reimer, Co-Chair

Objectives for the Meeting

10:30 a.m. - 11:15 a.m.

**Opening Address: Overview of Community-Partnered
Intervention Research**

- Dr. Noel Chrisman

11:15 a.m. - 11:45 a.m.

Discussion

11:45 a.m. - 12:45 p.m.

Lunch

12:45 p.m. - 3:00 p.m.

**Community-Partnered Interventions With Diverse
Populations**

- Dr. Nancy Rothman: Environmental Health
- Dr. Joanne Harrell: Child/Adolescent Health
- Dr. Sally Weinrich: Cancer

- 3:00 p.m. - 3:15 p.m. **Break**
- 3:15 p.m. - 4:00 p.m. **What Academicians/Researchers Need To Know About Establishing and Sustaining Community Partnerships**
- Reverend Dr. Melvin Tuggle, II
- 4:00 p.m. - 4:45 p.m. **Nontraditional Approaches to Conducting Community-Partnered Interventions To Reduce Health Disparities**
- Dr. Adeline Nyamathi
- 4:45 p.m. - 5:15 p.m. **Summation of Day and Closing Remarks Expectations for Day Two**

TUESDAY, NOVEMBER 6, 2001

- 9:00 a.m. - 9:15 a.m. **Welcome and Objectives for the Day**
- Dr. Janice Phillips, Program Director, NINR
 - Dr. Toni Tripp-Reimer, Co-Chair
- 9:15 a.m. - 10:30 a.m. **Challenges, Strategies, and Opportunities Related to Conducting Community-Partnered Interventions To Reduce Health Disparities**
- Dr. Toni Tripp-Reimer, Group Facilitator
- 10:30 a.m. - 10:45 a.m. **Break**
- 10:45 a.m. - 12:30 p.m. **Identifying Implications and Recommendations for Strengthening Future Community-Partnered Interventions To Reduce Health Disparities With an Emphasis on Nursing Research**
- Dr. Toni Tripp-Reimer, Group Facilitator
- 12:30 p.m. - 1:30 p.m. **Working Lunch**
- Continued Discussions Identifying Future Implications and Recommendations
- 1:30 p.m. - 2:00 p.m. **Summary of Meeting and Next Steps**
- Dr. Patricia Grady, Director, NINR
 - Dr. Janice Phillips, Program Director, NINR
 - Dr. Toni Tripp-Reimer, Co-Chair
- 2:00 p.m. **Adjournment**

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